Barnesville Area Education Foundation

P.O. Box 1

Barnesville, Ohio 43713

MEMBERSHIP APPLICATION

I designate that my gift be used as follows:

Trustees' Discretionary Fund (to be used only in connection with education)

[ ] Unrestricted

Operating Fund (to be used to meet the operating expenses of the Foundation)

[ ] Unrestricted

Both principal and income in unrestricted accounts may be spent.

Name Signature

Address City State Zip

Telephone Email Address

[ ] Alumni, class of _____

[ ] Faculty or Staff

[ ] Friend of the Foundation

[ ] _____